



Town of Holbrook
Board of Health
50 North Franklin Street
Holbrook, Massachusetts 02343

Tel: 781-767-3030
Fax: 781-767-9562

**Application for Permit to Remove, Transport, or Dispose of Garbage, Offal, or Other
Offensive Substances**

In conformity with the authority granted to the Holbrook Board of Health by Chapter 111, Section 31A of the General Laws, and amendments, and is subject to the provisions of the Laws of the Commonwealth of Massachusetts relating thereto, and upon such terms and conditions, and to the rules and regulations in regard to the carrying on of the occupation so licensed, as adopted by the Board of Health

Name of Applicant: _____ Tel. Number: _____

Business Name: _____ Tel. Number: _____

Business Address: _____

Owner: (if partnership- give names, addresses, and title of partners// if corporation, give names, addresses and positions of officers) _____

If dumpsters, give present locations in Holbrook: (attach list if necessary) _____

Pursuant to MGL Chapter 62C, Section 49A, I certify under the pains and penalties of perjury that I, to the best of my knowledge and belief, have filed all state tax returns and paid all state taxes required under the law.

If you have any questions, please contact the Board of Health

**By signing below, I understand to the above, agree and to the best of my ability comply with the terms,
